## Case 17-24948 Doc 5 Filed 06/06/17 Entered 06/06/17 15:30:40 Desc Main Document Page 1 of 3

Fill in this information to identify your case:			directed in this form and in Form
Debtor 1 <b>Joni Ryver</b>		122A-1Supp:	
Debtor 2 (Spouse, if filing)		■ 1. There is no pres	sumption of abuse
United States Bankruptcy Court for the: District of Utah		applies will be r	to determine if a presumption of abuse made under <i>Chapter 7 Means Test</i> ficial Form 122A-2).
Case number(if known)		☐ 3. The Means Test	t does not apply now because of y service but it could apply later.
		· .	, , , ,
Official Form 122A - 1		☐ Check if this is a	an amended filing
	ont Monthly	ncomo	40/45
Chapter 7 Statement of Your Curi	ent wonting	ncome	12/15
Be as complete and accurate as possible. If two married people are attach a separate sheet to this form. Include the line number to who case number (if known). If you believe that you are exempted from qualifying military service, complete and file Statement of Exempter 1:  Calculate Your Current Monthly Income	nich the additional information are a presumption of abuse b	tion applies. On the top of a ecause you do not have pri	iny additional pages, write your name and marily consumer debts or because of
,			
1. What is your marital and filling status? Check one only	у.		
<ul> <li>☐ Not married. Fill out Column A, lines 2-11.</li> <li>☐ Married and your spouse is filing with you. Fill out</li> </ul>	hoth Columns A and B	inos 2 11	
_	·		
■ Married and your spouse is NOT filing with you. Y	•		0.44
☐ Living in the same household and are not legal			
Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are le- living apart for reasons that do not include evading	gally separated under no	nbankruptcy law that appli	ies or that you and your spouse are
Fill in the average monthly income that you received from all s 101(10A). For example, if you are filing on September 15, the 6-mo the 6 months, add the income for all 6 months and divide the total b spouses own the same rental property, put the income from that pro-	nth period would be March 1 by 6. Fill in the result. Do not	through August 31. If the am include any income amount m	ount of your monthly income varied during nore than once. For example, if both
		Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2. Your gross wages, salary, tips, bonuses, overtime, a	nd commissions (before	e all \$ 1,237.80	\$
payroll deductions).  3. Alimony and maintenance payments. Do not include payment B is filled in.	payments from a spouse	· ·	\$
4. All amounts from any source which are regularly pai of you or your dependents, including child support. from an unmarried partner, members of your household, and roommates. Include regular contributions from a spo filled in. Do not include payments you listed on line 3.	Include regular contribution your dependents, parent	ons es,	<u> </u>
5. Net income from operating a business, profession, o	r farm	·	
	Debtor 1		
Gross receipts (before all deductions)	\$ 0.00		
Ordinary and necessary operating expenses	-\$ 0.00	0.00	•
Net monthly income from a business, profession, or farm	0.00 Copy he	re -> \$ 0.00	\$
6. Net income from rental and other real property	Debtor 1		
Cross receipts (before all deductions)	\$ 0.00		
Gross receipts (before all deductions) Ordinary and necessary operating expenses	-\$ 0.00		
Net monthly income from rental or other real property	\$ 0.00 Copy he	re -> \$ 0.00	\$
7. Interest, dividends, and royalties		\$ 0.00	\$
· · · · · · · · · · · · · · · · · · ·			

Official Form 122A-1

Case 17-24948 Doc 5 Filed 06/06/17 Entered 06/06/17 15:30:40 Desc Main Document Page 2 of 3

Debtor 1 Joni Ryver \_\_\_\_ Case number (if known)

				Column A Debtor 1		Column B Debtor 2 or non-filing s		
8.	Unemployment compensation			\$	0.00	\$		
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	received was a benef	it under					
	For you \$ For your spouse \$	0.	00					
	For your spouse \$							
	<b>Pension or retirement income.</b> Do not include any ambenefit under the Social Security Act.	ount received that wa	s a	\$	0.00	\$		
	Income from all other sources not listed above. Spect Do not include any benefits received under the Social Screceived as a victim of a war crime, a crime against hum domestic terrorism. If necessary, list other sources on a total below.	ecurity Act or paymen nanity, or international separate page and pu	ts or	\$	0.00	\$		
	•		_	φ		φ		
	Total amounts from accounts account 2			Φ	0.00	\$		
	Total amounts from separate pages, if any.		+	\$	0.00	\$		
	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the total		\$	1,237.80	+ \$ _		= \$	1,237.80
	Determine Whether the Many Tort Applicate	. Wass					Total o	urrent monthly
Part	Determine Whether the Means Test Applies to	Tou						
12.	Calculate your current monthly income for the year.	Follow these steps:						
	12a. Copy your total current monthly income from line 1	1		Сору	line 11 l	nere=>	\$	1,237.80
	Multiply by 12 (the number of months in a year)						<b>X</b> 1	
	12b. The result is your annual income for this part of the	form				12b.	\$	14,853.60
13.	Calculate the median family income that applies to y	ou. Follow these step	s:					
	Fill in the state in which you live.	UT						
	Fill in the number of people in your household.	3						
	Fill in the median family income for your state and size of household.  To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.							
14.	How do the lines compare?							
	14a. Line 12b is less than or equal to line 13. Or Go to Part 3.	the top of page 1, ch	eck box	1, There is n	o presun	nption of abuse	Э.	
	14b.  Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	page 1, check box 2	The pr	esumption of	abuse is	determined by	Form 12	22A-2.
Part	3: Sign Below							
	By signing here, I declare under penalty of perjury	that the information or	n this sta	atement and i	n anv atta	achments is tru	ue and co	orrect.
	X /s/ Joni Ryver				,			
	Joni Ryver Signature of Debtor 1							
	Date June 6, 2017 MM / DD / YYYY							
	If you checked line 14a, do NOT fill out or file Form	122A-2.						
	If you checked line 14b, fill out Form 122A-2 and fil	e it with this form.						

Case 17-24948 Doc 5 Filed 06/06/17 Entered 06/06/17 15:30:40 Desc Main Document Page 3 of 3

Debtor 1 Joni Ryver Case number (if known)

## **Current Monthly Income Details for the Debtor**

## **Debtor Income Details:**

Income for the Period 12/01/2016 to 05/31/2017.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Employment (6 m. Ave.)

Income by Month:

6 Months Ago:	12/2016	\$1,237.80
5 Months Ago:	01/2017	\$1,237.80
4 Months Ago:	02/2017	\$1,237.80
3 Months Ago:	03/2017	\$1,237.80
2 Months Ago:	04/2017	\$1,237.80
Last Month:	05/2017	\$1,237.80
	Average per month:	\$1,237.80